



Tutor Application

Name _____ D.O.B. ____/____/____

Email _____ Gender: M F

Cell Phone _____ Home Phone _____

Preferred Contact: _____ home phone _____ email _____ cell phone _____ text

Street Address _____

City _____ State _____ Zip _____

Student? ___ Y ___ N If yes, where _____ Undergrad/yr. _____ Grad/yr. _____

Employer _____ Phone _____

Availability & Interests

Tutoring commitment is a minimum of two hours per week. Coming twice a week allows the student to have the same tutor for both his/her sessions. We will expect tutors to be present a minimum of 85% of the time.

Number of times per week you are available for tutoring: _____ 1 time _____ 2 times

Please check all the days you are available: _____ Mon. _____ Tues. _____ Wed. _____ Thurs.

Please check times you are available to tutor: _____ 2:30-4:30 _____ 3:30-5:30 _____ 4:00-5:30

Available on Fridays for grades 5 & 6: _____ Y _____ N _____ Tutor virtually

Please describe experience/skills (i.e. teacher, volunteer service, hobbies, arts/crafts, interests) you may have to offer: _____

Do you speak any languages other than English? _____

Do you have a child/children eligible for our program? _____ Y _____ N

REFERENCE CHECK

Please be aware that tutors work directly with students and must complete tutor training and have a successful background check before participating in tutoring. You will be asked to fill out a form for this once you have completed the training.*

Please provide the names of two individuals who have knowledge of your character, personality and abilities to work with others. (Please print clearly.)

Name _____ Address _____

Email _____ Phone _____

Name _____ Address _____

Email _____ Phone _____

By signing below I am authorizing a Wizard's Wardrobe staff member to contact me about tutoring and other volunteer opportunities and training times. I consent to have my name added to the contact list.

Signed _____ Date _____

*You will find the 20120/2021 tutor training schedule on our website: www.wizardwardrobe.org

Please send complete form to:

South End Neighborhood Tutors
Attn: Program Director
PO Box 61
Albany, NY 12201